Department of Health Services State of California-Health and Western Agency HAZARDOUS MATERIALS MANAGEMENT SECTION HIGH STATE AND A SECTION THE SECTION OF SECTION O UNIFORM HAZARDOUS WASTE MANIFEST the claim was than a spire. It continuess STATE ID NUMBER (Please print or type with ELITE type (12 characters per inch). MANIFEST DOCUMENT NUMBER GENERATOR NAME AND MAILING ADDRESS EPA ID NUMBER CAL-AIR CONDITIONING SERVICE SMALL GENERATOR | | | AREA CODE/PHONE NUMBER EPA ID NUMBER TRANSPORTER NO. 1 VEH./CONTAINER NO. OMEGA CHEMICAL CORP. QA | DO |42245091| 12504 E. Whittier Blvd., Whittier CA. TRANSPORTER NO. 2/ALTERNATE TSD FACILITY EPA ID NUMBER EPA ID NUMBER TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY OMEGA CHEMICAL CORP. GA | DO |42245001 | | AREA CODE/PHONE NUMBER CONTAINER WASTE TOTAL UNIT UN/NA PROPER U.S. D.O.T., SHIPPING NAME AND HAZARD CLASS CAT. NO. DΜ (TRICHLO OFLUOROMETHANE) none mone 200 (25 (200 fact)) 200 (26 (201mb# 1 27 (201mb#)) FILLED IN BY 2 2 4 (1) 2 (1) 2 (1) 2 (1) 2 (1) 3 (1) 4 Dreads of the state to the gard.
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DISCREPANCY INDICATION SPACE

Facility owner or operator: Cerpincation of receipt of hazardous material covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste number. See instructions.

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ite of California-Health and Welfare Agency

Department of Health Services

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State of California-Health and Welfare Agency Department of Health Services HAZARDOUS WASTE MANAGEMENT BRANCH UNIFORM HAZARDOUS WASTE MANIFEST 714-744 P Street Sacramento, CA 95814 JULY 3, 1984 83493808 Please print or type with ELITE type (12 characters per inch) STATE ID NUMBER GENERATOR NAME AND MAILING ADDRESS MANIFEST DOCUMENT NUMBER CAL-AIR 12484 WHITTIER BLYB AREAWHITTIER P.N.GAR 90602 EPA ID NUMBER TRANSPORTER NO 1 CAL-AIR EPA ID NUMBER TRANSPORTER NO. 2/ALTERNATE TSD FACILITY TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY OMEGA CHEMICAL CORP. 12504 E. WHITTIER AREAWHUTTIER, NUCLE, 90602 BE FILLED IN BY GENERATOR 213/ 698-0991 WASTE DISP. CAT. NO METH TOTAL PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS QUANTITY 002 D1M 2,1,1 0,1 0,0,2,0,0 6 HAZARDOUS WASTE, LIQUID N.O.S. (R-113) CONC. RANGE UNITS COMPONENTS UPPER LOWER PPM TRICHLOROTRIFLUORO ETHANE Oiv SPECIAL HANDLING INSTRUCTIONS MO. DAY is used. Number of continuation sheets WLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE REC'D Øβ3 ACCEPTED TRANSPORTER Z ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE REC'D MO. DAY Printed or typed full name and signature ACCEPTED DISCREPANCY INDICATION SPACE TO BE FILLED IN BY TSDE Facility owner or operator: Certification of receipt of hazardous waste-covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF pout complete warte number. DATE RECEIVED & ACCEPTED MO. YR:

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Shipper P Der fmerit & Franth Services March 6, 1985 State of California—Health and Welfare Agency Toxic Substances Control Division Sacramento, California Information in the shaded areas is 'not' required by Federal lew: (Form designed for use on elite (12-pitch) typewriter. Manifest Document No. 1. Generator's US EPA ID No. UNIFORM HAZARDOUS WASTE MANIFEST
Generator's Name and Mailing Address CAL ATR Store Manifest Programment Number 12484 Whittier Blvd., Whittier, CA B.State Generator's ID Generator's Phone (213) 685-6110 Transport 1 Company Name C.State Transporter's ID US EPA ID Number D.Transporter's Phone 2 | 3 / 685 - 6 1 1 0 CAL AIR
Transporter 2 Company Name E.State Transporter's ID US EPA ID Number F. Transporter's Phone Designated Facility Name and Site Address OMEGA CHEMICAL CORP. 12504 E. Whittier Blvd. Whittier, CA 90602 US EPA ID Number G.State Facility's ID CAD 042 245 001 H.Fecility's Phone 213/698-0991 CAD 042 245 001 13. Total Unit Wt/Vol 11: US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number Waste No. Quantity Hazardous waste, Liquid N.O.S.ORM-E NA 9189 211 ാചാറി (R-11)K Handling Codes for Wastes Listed Above J. Additional Descriptions for Materials Listed Above TRICHLORO FLUORO METHENE 92% RO 5% 011 WATER 270 15 Special Handling Instructions and Additional Information 16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national acvernmental regulations. Date Month Day Printed/Typed Name SACKERANKUA Signat 10:3107185 Date 17. Transporter 1 Acknowledgement of Receipt of Materials Month Day Year Printed/Typed Name

ACLE FRANCLIN

18 Transporter 2 Acknowledgement or Receipt of Materials Signat 03107185 Date Month Day Year Printed/Typed Name 19. Discrepancy Indication Space Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item. 19.

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS

Signature

DHS 8022 A (7/84) (EPA 8700-22)

Printed/Typed Name

TO: P.O. Box 3000, Sacramento, CA 95812

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State of California-Health and Welfare Agency

Department of Health Services roxic Substances Control Division Secremento, California

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White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
TO: P.O. Box 3000, Sacramento, CA 95812

Signature

20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.

19. Discrepancy Indication Space

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To: P.O. Box 3000, Sacramento CA 95812

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State of California—Health and Welfare Agency

Department of Health Services Toxic Substances Control Division Sacramento, California

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State of California—Health and Welfare Agency

Department of Health Services
Toxic Substances Control Division
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DHS 8022 A (11/85) (EPA 8700—22) White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS To P.O Box 3000, Sacramento CA 95812

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19	Discrepancy Indication Space				ring Sectorion		***************************************	<u> </u>
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EPA 8700—22 (Rev. 9-86) Previous editions are obsolete.

To: P.O. Box 3000, Sacramento, CA 95812

WASTE MANIFEST 3. Generator's Name and Mailing Addre	CHD078140668	Document No.	of is not re A. State Manifest Docum	ion in the shaded as equired by Federal is ent Number 9405
4. Generator's Phone (213) 685 5. Transporter 1 Company Name Cal Air 7. Transporter 2 Company Name	6-6110 CADOZYI	40661	C. State Transporter's ID D. Transporter's Phone E. State Transporter's ID F. Transporter's Phone	
9 Designated Facility Name and Site A Omega Recovery S 12504 E. Whittie Whittier, CA 906	Services er Blvd,	45 001	G. State Facility's ID C A D O 4 2 H. Facility's Phone 213/698-	<u> থ শ সতাতা li</u> -0991
11. US DOT Description (Including Prop	per Shipping Name, Hazard Class, and ID Number)	12: Conta No:	iners 13, Total Quantity Type	14. I. Unit Waste N
Hazardous waste (R-11)	•	90 X	- 3ου Ορ πα	State 211 P EPA/Other
b. Waste Flammable (Waste Oil)	E Liquid NOS UN 19 Flammable Liquid	93 P A	PM OIDIGITO	G EPA/Other State
d.				EPA/Other State
J. Additional Descriptions for Materials	Listed Above		K. Handling Codes for W. a. C.	EPA/Other astes Listed Above b.
15. Special Handling Instructions and A. A. 2 - 200 Pound B. Waste Oil	dditional Information -100 Pound dr		Recycle) dispose)	
name and are classified, packed international and national governm If I am a large quantity generator, determined to be economically present and which minimizes the present and the present a	I hereby declare that the contents of this cons, marked, and labeled, and are in all respects nent regulations. I certify that I have a program in place to reducaction and that I have selected the practice and tuture threat to human health and the envirageneration and select the best waste managemer.	in proper condition ce the volume and table method of trea conment; OR, if I am	for transport by highway (oxicity of waste general tment, storage, or dispo a small quantity general	according to applicated to the degree I has sal currently available or, I have made a go
Printed / Typed: Name 7. Transporter 1 Acknowledgement of 1	Signature Signature			Month Day
Frinted/Typed Name	Signature	Jun 1	Aul	Month Day
18. Transporter 2 Acknowledgement of Frinted/Typed Name 19. Discrepancy Indication Space	Signature	JIM	til	Month Day
		le manifest	Sapled is here to	
Printed/Typed Name I S AAC \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ion of receipt of hazardous materials covered by th	is mannest except a	s noted in item 19.	Month Day

To: P.O. Box 3000, Sacramento, CA 95812

A	7—80 California—Health and Welfere Agency pproved OMB No. 2050—0039 (Expires 9-30-	91)	structions o and Front			5			Dep Toxic S	artment of Healt ubstances Conto Sacramento	ol Divisi
•	UNIFORM HAZARDOUS WASTE MANIFEST	1. Generator's US EPA ID		Docu	nifest ment No.	2. F	Page 1 of 1	4.5		he shaded area by Federal law.	,
	3. Generator's Name and Mailing Address CAL AIR	C[A]D[0]7[8]1	#1010101		LL ,	A. Sta	بناء	S 8	293	553	
	12484 E. WHITTIER BL		CA				te Genera				
	4. Generator's Phone (213 ##8#### 5. Transporter 1 Company Name	6.	US EPA ID	Number			ite Transp		D		
	CAL AIR 7. Transporter 2 Company Name	ICIAI	L1017181 us epa id		101618		nsporter's ite Transp	27	D		
	9. Designated Facility Name and Site Addre	1 I I	IJS EPA ID	Number	ــــــــــــــــــــــــــــــــــــــ	L	naporter's	97.			
	OMEGA RECOVERY SERVI	CES	-		, ,	H. Fac	ADIZ) 4 2 one	1214	5001	
	WHITTIER, CA 90602		DI014121	21415	0 0 1 12. Cont	·	(213)		0991	i.	
ļ	11. US DOT Description (Including Proper SI			•	No.	Туре	Qı	uantity	Unit Wt/Vol	Waste I	lo.
	* HAZARDOUS WASTE LIQU	ID N.O.S NA ORM-E	1693		01110	TOLM			G	EPA/Other	
	b		2		01113	זאַרונו			19	State EPA/Other	
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	d.							100 (100 m) 100		State EPA/Other	#
	J. Additional Descriptions for Materials Liste	d Above	2		<u> </u>	K. Ha a.	indling Co	des for V	Wastes L	isted Above	S.L.
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	15. Special Handling Instructions and Addition	nai information	, } ,	,							
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	16. GENERATOR'S CERTIFICATION: I her and are classified, packed, marked, and national government regulations. If I am a large quantity generator, I certif to be economically practicable and that present and future throat to human healing eneration and select the best waste me	labeled, and are in all responsively that I have a program in placetical than the environment; OR,	ace to reduce to ble method of to if I am a small of	ndition for he volume eatment, s pantity ge	and toxicity storage, or nerator, I h	y of was disposa	vay accordite general	aing to a ited to the available	ne degree se to me v	e I have determi which minimizes	ned the
	Printed/Typed Name		Signature	7	X			<u>*</u>		Month Day	Year
1	17. Transporter 1 Acknowledgement of Rece	ipt of Materials	1/1/4	-	J V			el E		J ZIJV	18/2
	Printed/Typed Name		Signature					0.00		Month Day	Year
-	18. Transporter 2 Acknowledgement of Rece	ipt of Materials	Cignot		1			*		Month Car	Year
۱	Printed/Typed Name		Signature		:					Month Day	reaf

DHS 8022 A (1/88)

19. Discrepancy Indication Space

Printed/Typed Name

Z

DHS 8022 A (1/88)

EPA 8700—22
(Rev. 9-88) Previous editions are obsolete.

20. Facility Owner or Operator Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.

Signature

White: TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS
To: P.O. Box 3000, Socramento, CA 95812

Month Day Year

1012/1789

Please print or type. (Form designed for use on elite (12-pitch typewriter).

WASTE MANIFEST	Generator's US EPA 10 No ADI 073: 1401 068: 1	Docu	nitest ment No 15110	(of is	not required	he shaded areas by Federal law.
CAL AIR INC 12484 WHITTIER BLVD,WHI 4 Generator's Phone 810) 698-8310	TTTER CA 90601				e Manifest Do	<u> 3455</u>	and the state of t
5 Transporter 1 Company Name OMEGA RECOVERY SERVICES	CAP 042 245	(A)		D. Tran		me 310	0 845 A 698-0991
7. Transporte: ¿Company Name Romic Chemical 9. Designated Facility Name and Site Address	10 US E 10 US E	PA 10: Number <u></u>	657	F. Tren	e Transporter isporter's Pho e Facility's K	ne 4/5	- 394:7633
SUMMIT ENVIRONMENTAL COMP 3033 W. VIISSION RD ALHAMBRA, CA 91803	ORATION ALTERN	₩€	<u>ව</u> ු _	H. F&	 inty's Phone 18 457	<u> </u>	
11. US DOT Description (Including Proper Shippin	ng Name, Hazard Class, and ID N	lumber)	i∠. Conti No.	Type	73. Total Quantit	ı≱ y Unit Wt/Vo	uste No.
HAZARDOUS WASTE SOLIDS N (PVAC EMULSION ADHESIVE,D SOLID)		RT			ାଠା ଥିବ		281 PART PCK, State
A			11		144	ı	EFA/Cher
R C.			1.1		111		EPA/Othes
d.					111		State
J. Additional Descriptions for Materials Listed Ab A) MATERIAL FOR PROCESSIN	G	√c#),		K. Her a. 997	ndling Codes	or Wastes I	Listed Above
Pomic ProFile 2 15. Special Handling Instructions and Additional In EMERGENCY CONTACT 310 6	05591	•		د داه (۱) ۲۶	alent Ied	CAD 8	oyusies j
PROFILE NUMBER			e. pare 415-3)es ⁻	
GENERATOR'S CERTIFICATION: I hereby of and are classified, packed, marked, and labe national government regulations. If I am a large quantity generator, I certify tha	led, and are in all respects in pro til have a program in place to re	oper condition for duce the volume	transport t	y highwi of wast	ay according e generated i	to applicabl to the degre	e international and e I have determined
to be economically practicable and that I have present and future threat to human health an convention and select the best waste manage.	the environment; OR, if I am a	small quarfity ge o me and that I co	nerator, i hi				
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(Rev. 9-88) Previous editions are obsolete.

White TSDF SENDS THIS COPY TO DOHS WITHIN 30 DAYS To P.O. Box 3000, Socramento; CA 95812

UNIF MATTAZ Anod SAVASTE MANIFEST

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s.	PS	****	11000				
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			352454	1.00		- 30	Gart.

STATE ID NUMBER iase print of type with ELD E type (12 characters per inch). MANIFEST DOCUMENT NUMBER GENERATOR NAME AND MAILING ADDRESS Cal-Air Conditioning Service EPA TO NUMBER SMALL GENERATOR AREA CODE PHONE NUMBER EPA ID NUMBER VEH /CONTAINER NO. TRANSPORTER NO 1 Omega Chemicae Corp. 12504 E. Whittier Blvd. Whittier, CA. da 100 42245001 TRANSPORTER NO. 2/ALTERNATE TSD FACILITY EPA ID NUMBER TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY TO BE FILLED IN BY GENERATOR OMEGA CHEMICAL CORP. 213/698-0991 AREA CODE/PHONE NUMBER CONTAINER WASTE DISP TOTAL UNIT UN/NA CAT NO. METH PROPER U.S. D.O.T. SHIPPING NAME AND HAZARD CLASS TYPE QUANTITY WT/VOL NO. NUMBER 1200 d6 HOME pds R-11 Trichlorofluoromethane None UNITS CONC. RANGE PPAS COMPONENTS UPPER LOWER SPECIAL HANDLING INSTRUCTIONS 796 Mo This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation DAY YB. MO. and the EPA. প্রি -Check if continuation sheet is used Number of continuation sheets MO Y 13 TRANSPORTERA ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE TO BE FILLED IN BY TRANSPORTER REC'D 8 ACCEPTED RANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES DATE REC'D & ACCEPTED Printed or typed full name and signature DISCREE ANCY INDICATION SPACE FO BE FILLED Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSDF must complete waste DATE RECEIVED & ACCEPTED DAY YR MO. number. See instructions. Stewe Simpson Printed or typed full name and signature

generator_name	CAL AIR
lc_name:	CAL-AIR, INC.
lc_calc_volume:	12.3711 tons
manifest_number	manifest_quantity_ton
08270883	0.4 tons
83029866	0.4 tons
83410614	0.15 tons
83410704	0.345 tons
83493808	0.834 tons
83493946	0.05 tons
84341416	1.1 tons
84341434	0.3 tons
84345306	0.5 tons
84345339	0.68805 tons
84720073	1.60545 tons
86534641	0.85 tons
86544003	0.4 tons
87114069	0 tons
87118662	0.3 tons
87118772	0.2502 tons
87119021	0.4 tons
87119060	0.0834 tons
87119405	0.3334 tons
88293553	2.98155 tons
88345510	0.4 tons

Tuesday, July 30, 2002 Page 13 of 112